Case 16-37765 Doc 1 Filed 11/30/16 Entered 11/30/16 11:30:32 Desc Main Page 1 of 52 Document

	Document 1 age 1
Fill in this information to identify your cas	e:
United States Bankruptcy Court for the:	The state of the s
Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

FILED UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NOV 30 2016

JEFFREY P. ALLSTEADT, CLERK

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

. Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your government-issued picture identification (for example, your driver's license or	Michael First name W.	First name
passport). Bring your picture	Middle name Allen	Middle name
identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you		
have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Łast name	Last name
Entire ner own delivers to the recurrency per entering a second second second second of region and second s		TO COMMITTE THE PRINTED AND ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINISTRAT
Only the last 4 digits of your Social Security	xxx - xx - <u>8 3 5 2</u>	
Individual Taxpaver	DR .	XXX - XX
Identification number (ITIN)) xx - xx	9 xx - xx

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Debtor 1	Michael Michael	W. Allen		_
	Midd	lle Name Last Name		Case number (# known)
SELECTION OF PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE P		About Debtor 1:	allender of desire to the second of the seco	
		THE STATE OF THE S		About Debtor 2 (Spouse Only in a Joint Case):
and E Identi (EIN)	usiness names mployer fication Numbers you have used in	✓ I have not used any business names	or EINs.	☐ I have not used any business names or EINs.
:	st 8 years	Business name		Business name
doing b	trade names and usiness as names	Business name		
		ocomicos maine		Business name
		EIN		EIN
		EIN		EIN
5. Where	you live			If Debtor 2 lives at a different address:
		7050.0		a tros at a different address:
		7350 South Phillips - Apt. 303 Number Street		A
				Number Street
		Chicago IL	60649	
		Cook	ZIP Code	City State ZiP Code
		County		County
		If your mailing address is different from above, fill it in here. Note that the court wi any notices to you at this mailing address.	the one ill send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		None		3 ************************************
		Number Street		Number Street
		P.O. Box		P.O. Box
		City State		
to significant and control of the parameter of the significant of the	ent indicate and productive contractive co	State State	ZIP Code	City State ZIP Code
Why you	are choosing	Check one:	generably will year op much by tensorickly by factors or drawn by the	
this distri	ct to file for	Over the last 180 days before filing this p		Check one:
wanti apti	.y	I have lived in this district longer than in a other district.	etition, any	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
og majet 1900-sakal ka malang sa	And the second s		· · · · · · · · · · · · · · · · · · ·	
		A STATE OF THE PROPERTY OF THE	Markette	ļ

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	lle Name	Lasi Na	llen ^{ame}		Case numbe	·f (if known)		
Part 2: Tell the Court A	bout You	ır Bankrı	uptcy Case					
7. The chapter of the Bankruptcy Code you	Chec	ck one (Ec	Or a brief doceri	otion of each, see A	Votice Required by	11 U.S.C. § 342(b) for Individuals Filing		
are choosing to file under	for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7							
		hapter 11						
		hapter 12						
		hapter 13						
hari, yanataa muu dii soo, hari kany harikaan kanoo ka kanoo ka gana, harigama kanoo ka sihama ka yalaaha da dii kana k	NET-COMMENTANCINAMINATION (More and the second of the sec	Company or the first programmeter below to way for the direct	t to the first which the translate of the first principal of the first special of the first s		MARKET STAFFAN FERSKAN EN SEMANNE SANSKAN STAFFAN SKELLE FERSKELLE AN MARKET SKELLE SK		
8. How you will pay the fee	loo yo su	urself, yo bmitting	ou may pay wi	th cash, cashier's	r may pay. Typic	check with the clerk's office in your ally, if you are paying the fee by order. If your attorney is y pay with a credit card or check		
	□ in Ap	eed to pa plication	ay the fee in i for Individuals	installments. If y to Pay The Filin	ou choose this og Fee in Installm	option, sign and attach the eents (Official Form 103A).		
	les pay	s than 15 / the fee i	50% of the officin installments	cial poverty line the	hat applies to yo	otion only if you are filing for Chapter 7 and may do so only if your income is ur family size and you are unable to must fill out the Application to Have the twith your petition.		
Have you filed for bankruptcy within the	☑ No		And the second s					
last 8 years?	☐ Yes.	District		When		Case number		
		District		When				
					MM / DD / YYYY	Case number		
		District _		When				
					MM / DD / YYYY	Case number		
Are any bankruptcy	☑ No	***************************************	can amilion to a constant of processed by the second of the second by the second of th			Case number		
cases pending or being filed by a spouse who is		Debtor _			MM / DD / YYYY			
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an		Debtor			MM / DD / YYYY			
cases pending or being		District		When	MM / DD / YYYY	Relationship to you Case number, if known		
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an		District		When	MM / DD / YYYY	Relationship to you Case number, if known		
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an		District		When	MM / DD / YYYY	Relationship to you Case number, if known		
filed by a spouse who is not filing this case with you, or by a business partner, or by an	Yes.	Debtor District	: 12. landlord obtains	When When	MM / DD / YYYY MM / DD / YYYY	Relationship to you Case number, if known		

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Debtor 1	Michael First Name Middle	W.	Allen Last Name	Case number (# known)					
			reast dutile	The state of the s					
Part 3:	Report About An	y Busine	esses You Own as	a Sole Proprietor					
2. Are ye	ou a sole proprieto								
of any busin	/ full- or part-time		o. Go to Part 4.						
	proprietorship is a	₩ Ye	es. Name and location	of business					
busines	is you operate as an lial, and is not a		None						
separat	e legal entity such as		Name of business, if a	any					
a corpo LLC.	ration, partnership, or		Number Street						
If you ha	ave more than one								
separate	prietorship, use a e sheet and attach it								
to this p	etition.		City						
			·	State ZIP Code					
			Check the appropria	ate box to describe your business:					
			Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))					
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))					
			Stockbroker (as	defined in 11 U.S.C. § 101(53A))					
			Commodity Brok	er (as defined in 11 U.S.C. § 101(6))					
			None of the abov	∕e					
debtor? For a defi	a small business nition of small debtor, see	🗹 No.	I am not filing under (
11 U.S.C.	§ 101(51D).	☐ No.	 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. 						
				oter 11 and I am a small business debtor according to the definition in the					
t 4: R	eport if You Own o	r Have	Any Hazardous Pro	operty or Any Property That Needs Immediate Attention					
	wn or have any	☑ No							
roperty	that poses or is		***						
of immin	o pose a threat ent and	₩ Yes,	What is the hazard?						
dentifiab ublic he	le hazard to alth or safety?								
Or do you	i own any								
property mmediat	that needs e attention?		If immediate attention	n is needed, why is it needed?					
or exampl	e, do you own			,, o a nococo:					
at must be	goods, or livestock e fed, or a building urgent repairs?								
	,		Where is the property	2					
			and to the property	Number Street					
				City State ZIP Code					
				Oldio Zir Code					

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Debtor 1

Michael

<u>W.</u>

Allen

Case	number	(if transmit
VUJU	1 UNITED	(if (nonum)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1
-------	--------	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	I am not required to receive a briefing	abot
	credit counseling because of:	

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am not	required	to	receive	а	briefina	about
credit co	unseling	be	ecause o	f:		

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after t

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Pirst Name Middle I	VV. Allen Name Last Name	Case number (#	known)
Part 6: Answer These Qu	estions for Reporting Purp	oses	
16. What kind of debts do you have?	16a. Are your debts prim as "incurred by an indivi	narily consumer debts? Consumer de idual primarily for a personal, family, or ho	ebts are defined in 11 U.S.C. § 101(8)
you nave:	No. Go to fine 16b. Yes. Go to line 17.	or a personal, tarring, of no	usenoia purpose."
	16b. Are your debts prim money for a business or	arily business debts? Business debts investment or through the operation of th	s are debts that you incurred to obtain
	No. Go to line 16c. Yes. Go to line 17.	and operation of the	e business or investment.
		ou owe that are not consumer debts or bu	usiness debts.
17. Are you filing under Chapter 7?	☐ No. I am not filing under (Chapter 7. Go to line 18.	and the contract of the contra
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	r ☑ Yes. I am filing under Chap administrative expens ☑ No	pter 7. Do you estimate that after any exe ses are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐ More than \$50 billion ☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
art 7: Sign Below	I have evamined this patition		:
or you	If I have chosen to file under Ch	nd I declare under penalty of perjury that t napter 7, I am aware that I may proceed, if I understand the relief available under eac	
	If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone wand read the notice required by 11 U.S.C.	ho is not an attorney to help me fill out 8 342/h)
	I request relief in accordance with	th the chapter of title 11, United States Co	ede, specified in this petition
	I understand making a false state	ement, concealing property, or obtaining r	monay and an arranged to the
	X Meller of Debter 1	. All x 1	
	Signature of Debtor 1 Executed on	Signature of Executed of	of Debtor 2

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Debtor 1	Michael First Name	W. Middle Name		llen Name		Case number (# kr	nownj	
attorney If you are r	you are filin y without ar represented	bv	themsel	ves successful		t extremely di	A	
an attorney need to file	v vou do no v	st T	To be suc technical, dismissed hearing, c firm if you	ccessful, you mus and a mistake or because you did or cooperate with r case is selected	t correctly file and han inaction may affect you not file a required doc the court case trustee	odle your bankru our rights. For e cument, pay a for y, U.S. trustee, b	uptcy case. The rules are verxample, your case may be see on time, attend a meeting on the contractor, or the contractor, or the contractor, or the contractor of the contract	ng or
			You must court. Eve in your scl property o also deny case, such cases are	list all your prope n if you plan to pa nedules. If you do r properly claim it you a discharge o n as destroying or randomly audited	rty and debts in the so ay a particular debt out o not list a debt, the del as exempt, you may r of all your debts if you	thedules that yo tside of your ba bt may not be d not be able to ke do something d ving records, or	ou are required to file with the inkruptcy, you must list that lischarged. If you do not list eep the property. The judge lishonest in your bankruptcy lying. Individual bankruptcy	t debt t e can y
			If you decide hired an at successful Bankruptcy	de to file without a torney. The court , you must be fan / Procedure, and	an attorney, the court of will not treat you differ sill not treat you differ sill are with the United St	expects you to for rently because y tates Bankrupto	follow the rules as if you had you are filing for yourself. T by Code, the Federal Rules our case is filed. You must a	o be
			Are you aw consequen No Yes	are that filing for ces?	bankruptcy is a serious	s action with lor	ng-term financial and legal	
			Are you aw	are that bankrupt or incomplete, you	cy fraud is a serious cr u could be fined or imp	rime and that if grisoned?	your bankruptcy forms are	
			Did you pay No Yes, Nan	e of Person	Veronica F	ason	ip you fill out your bankrupt If Signature (Official Form 119	
			o . oud u	is understood till	ge that I understand the s notice, and I am awa e my rights or property	ire that filing a b	in filing without an attorney pankruptcy case without an perly handle the case.	<i>y</i> .1
		×	M/A Signature of D	us W. a	UL	Signature of	f Debtor 2	:
			Date	1/29/6 MM/DD 19999	_	Date	MM / DD /YYYY	
			Contact phone Cell phone	(773) 610-356	8	Contact phoi	ne	:
		E	mail address	N/A		Email addres	SS	-

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Debtor 1	Michael	W.	Allen		
	First Name	Mid	die Name	Last Name	
Debtor 2					
(Spouse, if fili	ng) First Name	Mide	ile Name	Last Name	· · · · · · · · · · · · · · · · · · ·
United State	es Bankruptcy Cour	t for the: Northe	rn District of Illino	ois	¥
United State Case numb		t for the: Northe	rn District of Illino	ois	ı
	(If known)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
Schedule A/B: Property (Official Form 106A/B)	Your assets Value of what you own
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,300.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,300.00
Part 2: Summarize Your Liabilities	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 18,158.00 \$ 8,000.00 + \$ 33,245.00
Your total liabilities	\$59,403.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,901.00

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Đ	ebtor 1	Michael First Name	W.	Allen Last Name		Case number (# known)	
		u filing for ban	kruptcy under	Chapters 7, 11, or 13			
	Yes	5	ing to report on	this part of the form. C	neck this box and submit this	form to the court with your oth	er schedules.
7	You fam	,, 0, 1100301101	imarily consund purpose." 11	sumer debts. You hav	lines 8-9g for statistical purp	an individual primarily for a pers poses. 28 U.S.C. § 159, art of the form. Check this box a	
8.	From the Form 12	ne Statement of 22A-1 Line 11; (of Your Current OR, Form 122B	Monthly Income: Cop Line 11; OR, Form 122	y your total current monthly in C-1 Line 14.	nnome from Official	\$ 2,000.00
9.	Copy th	e following sp	ecial categorie	s of claims from Part	4, line 6 of <i>Schedule E/F</i> :	Total claim	etti Marinde van 1904 tii valka kan ja k Kan ja kan j
	From	Part 4 on Sche	dule E/F, copy	the following:			
	9a. Dom	estic support of	bligations (Copy	line 6a.)		\$0.00	
	9b. Taxe	es and certain o	ther debts you o	owe the government. (C	opy line 6b.)	\$8,000.00	
	9c. Clain	ns for death or p	oersonal injury v	vhile you were intoxicat	ed. (Copy line 6c.)	\$	
	9d. Stud	ent loans, (Cop	y line 6f.)			\$0.00	
	9e. Oblig priori	ations arising o	out of a separation	on agreement or divorce	e that you did not report as	\$0.00	
	9f. Debt	s to pension or	profit-sharing pl	ans, and other similar d	ebts. (Copy line 6h.)	+ \$0.00	
	9g. Total	l. Add lines 9a ti	hrough 9f.			\$8,000.00	

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Debtor 1	Michael	W.	Allen	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
Jnited States I	Bankruptcy Court for	the: Northern District of Illinois		

Official Form 106A/B

Schedule A/B: Property

12/15

Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1	es. Where is the property?				
1.1.	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu	claims or exemptions. Pu ured claims on Schedule I laims Secured by Property	
		Manufactured or mobile home	Current value of the entire property?	e Current value of t portion you own?	
		- D Land	\$0.00		
	City State ZIP Code	Investment property Timeshare	Describe the nature	of your ownership	
	Jidio Zii Code	Other interes		e simple, tenancy by	
		Who has an interest in the property? Check one.	the entireties, or a l	ife estate), if known.	
		Debtor 1 only			
	County	Debtor 2 only			
		Debtor 1 and Debtor 2 only At least one of the debtors and another	(see instructions)	s community property	
ou	own or have more than one, list here:	Other information you wish to add about this it property identification number:	- 17 2-100-		
		Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any securing Creditors Who Have Cla	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.	
	own or have more than one, list here: Street address, if available, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.	
		Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured of the amount of any secure Creditors Who Have Cla	claims or exemptions. Put ed claims on Schedule D ims Secured by Property. Current value of th	
2.		Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured of the amount of any secur. Creditors Who Have Cla Current value of the entire property? \$0.00 Describe the nature interest (such as fee	claims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of th portion you own? \$ 0.0 of your ownership	
.2.	Street address, if available, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured of the amount of any securic Creditors Who Have Cla Current value of the entire property? \$0.00 Describe the nature	claims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of th portion you own? \$ 0.0 of your ownership	
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Document Page 11 of 52 Michael Debtor 1 W First Name Case number (if known) What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put 1.3. Single-family home the amount of any secured claims on Schedule D: Street address, if available, or other description Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? 0.00 Land 0.00 Investment property City State ZIP Code □ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. 0.00 Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No 2 Yes **GMC** Who has an interest in the property? Check one. Make: 3.1. Do not deduct secured claims or exemptions. Put Debtor 1 only Envoy the amount of any secured claims on Schedule D: Modei: Creditors Who Have Claims Secured by Property. Debtor 2 only 2003 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the 134000 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 3,800.00 Check if this is community property (see 0.00 instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions)

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. . . .

Debtor 1

Michael First Name

W.

Allen

Case number (if know)

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Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe...... Household Furniture 800.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe...... Electronics 400.00 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **⊿** No Yes. Describe...... 0.00 \$ 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Yes. Describe...... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ✓ No Yes. Describe...... 0.00 11. Ciothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe...... 100.00 Clothings 12. Jeweiry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Yes. Describe...... 0.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. ☐ Yes. Describe...... 0.00 \$ 14. Any other personal and household items you did not already list, including any health aids you did not list 2 No Yes. Give specific 0.00 information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 1,300.00 for Part 3. Write that number here

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Debtor 1

First Name

W.

Document

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Michael

Middle Name

Allen

Case number (if known

Do you own or have	any legal or equitable interest in any o	of the following?	portion y	uct secured clair
16. Cash				
	you have in your wallet, in your home, in	a safe deposit box, and on hand when you file your petition		
☑ No □ Yes				
163		Cash:	\$	0.00
17. Deposits of mone Examples: Checking and oth	ng, savings, or other financial accounts: o	ertificates of deposit; shares in credit unions, brokerage houses, accounts with the same institution, list each.		
☐ Yes	Insti	lution name:		
	17.1. Checking account:		\$	0.00
	17.2. Checking account:		\$	0.00
	17.3. Savings account:		\$ \$	0.00
	17.4. Savings account:		¢	0.00
	17.5. Certificates of deposit:		Φ	0.00
	17.6. Other financial account:		a	0.00
	17.7. Other financial account:		p	0.00
	17.8. Other financial account:		\$	0.00
	17.9. Other financial account:		\$	0.00
			\$	0.00
8. Bonds, mutual fund Examples: Bond fun No Yes	ds, or publicly traded stocks ds, investment accounts with brokerage f	rms, money market accounts		
			\$	0.00
			\$	
			~	0.00
			\$	0.00
9. Non-publicly tradec an LLC, partnershij	stock and interests in incorporated a o, and joint venture Name of entity:	nd unincorporated businesses, including an interest in	\$	
No Yes. Give specific	Name of entity:	% of ownership:	\$	0.00
No No	Name of entity:	% of ownership:	\$	

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Michael W. Allen

Debtor 1	Michael First Name	W.	Allen	Casa number ::	
	e eat manie	Middle Name	Last Name	Case number (# known)	
***************************************	te terremon a la la j	to the second of the second	the control of the state of the control of the state of t	the second control of	man e es e e e e e e e e e e e e e e e e e
20. Govern	ment and corp	porate bonds and	other negotiable and non-negotiable instrum	ents	
rvegoua	ible instruments	include nerconal a	necks, cashiers' checks, promissory notes, and cannot transfer to someone by signing or delive		
☑ No		and and anodo you	carnot transfer to someone by signing or delive	ring them.	
_	Give specific	Issuer name:			
infor	mation about				
tnen	1				0.
					0
				\$	0
1. Retirem	ent or pensior	1 accounts			
Example	s: Interests in I	RA, ERISA, Keogh	401(k), 403(b), thrift savings accounts, or other	Dension of profit-sharing plans	
NO NO				position of profit sharing plans	
	List each	Type of account:	In additional and		
	arn coparatory.		Institution name:		
		401(k) or similar pla	1:	\$	0.0
		Pension plan:		·····	0.0
		IRA:			0.0
		Retirement account			0.0
		Keogh:			~ .
		Additional account:			
					0.0
		Additional account:			0.0
companie	s, or others	deposits you have with landlords, prep	nade so that you may continue service or use fi id rent, public utilities (electric, gas, water), tele	om a company communications	
Yes		I	stitution name or individual:		
		Electric:		\$	0.0
		Gas:		5	0.0
		Heating oil:		φ	0.0
		Security deposit on re	ntal unit;	φ	0.0
		Prepaid rent:		· · · · · · · · · · · · · · · · · · ·	0.0
		Telephone: _		\$\$	0.0
	1	Water:		***************************************	0.0
	İ	Rented furniture:		\$	0.0
	,	Other:		\$	0.0
				\$	
Annuities ((A contract for a	a periodic payment	of money to you, either for life or for a number o	f vears)	
☑ No				· - /	
☐ Yes		ssuer name and des	pription:		
					0.00
	***				0.00
	_			2	0.00

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24. Interests in an education IRA in an account in a qualified ABLE program, or under a qualified state turkion program. 25 U.S.C. §\$ 530(b)(1), 529A(b), and 529(b)(1). 2 Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c). 3	Debtor 1	Michael First Name	W. Middle Name	Allen Last Name	Case number (# known)		
No Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(6). 0.00 S S S S S S S S S	Williams on the contract of th			Last Naftië	V CONTROL Of Anthropassan Control of the Control of	***************************************	
No	24. Interes	ts in an education	n IRA, in an a	secount in a qualified ABL	program or under a qualified state tulking and		eratura salah masa
Yes institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): 0.00		33(-)(-), 0	29A(b), and 5	29(b)(1).	o de la companya de l	gram.	
0.00 S S S S S S S S S	-						
Company Security	La Yes	S	······ Institutio	on name and description. Se	parately file the records of any interests.11 U.S.C.	§ 521(c)·	
\$,	3 02 1(0).	0.0
Samples: Building permits, exclusive licenses, proceeds from royalties and licensing agreements Samples: Building permits, exclusive licenses, proceeds from royalties and licensing agreements Samples: Building permits, exclusive licenses, copyrights, trademarks, trade secrets, and other intellectual property Samples: Internet domain names, websites, proceeds from royalties and licensing agreements Samples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Van No Yes. Give specific information about them. Samples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Van No Yes. Give specific information about them. Samples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Van No Yes. Give specific information about them. Samples:			0.00			\$	0.0
25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them						\$ <u></u>	0.0
Yes. Give specific information about them						 \$	0.0
No	25. Trusts,	equitable or futu	re interests ir	n property (other than any	hing listed in line 1), and rights or nowers		
Sease Sive specific information about them		able for your ben	nefit	•	o ment of the first of powers		
information about them		O 1	***				
Se Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No	infor	. Give specific rmation about then	n				
No Yes. Give specific information about them						\$	0.0
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them	6. Patents	, copyrights, trad	lemarks, trad	e secrets, and other intelle	ectual property		
Yes. Give specific information about them	±хатріє	es: Internet domair	names, web	sites, proceeds from royaltie	s and licensing agreements		
information about them							
7. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses V No	✓ Yes. infor	. Give specific mation about them	Table of the same			**************************************	
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No		The state of the s				\$	0.0
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No	7. License	s, franchises, and	d other gener	al intangibles		and you are are and the tast	
Ves. Give specific information about them	Example	es: Building permits	s, exclusive lic	enses, cooperative associat	ion holdings, liquor licenses, professional licenses		
information about them	∠ No		-				
Identify or property owed to you? Current value of portion you ow Do not deduct see Calaims or exemption about them, including whether you already filed the returns and the tax years. State: \$ 0.4	Yes.	Give specific		The state of the s		The state of the s	
8. Tax refunds owed to you Ves. Give specific information about them, including whether you already flight due returns and the tax years	#11011	mation about them				\$	0.00
8. Tax refunds owed to you Ves. Give specific information about them, including whether you already filed the returns and the tax years. State: \$ 0.1	Money or p	roperty owed to v	/ou?			Philippin manus property graph	
B. Tax refunds owed to you X						Current va	lue of the
8. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years. State: \$ 0.4						Do not dedu	ct secured
Yes. Give specific information about them, including whether you already filed the returns and the tax years. Federal: \$ 0.4 State: \$ 0.4 Local: \$	B. Tax refu	nds owed to you				ciains of ex	emplions.
about them, including whether you already filed the returns and the tax years. State: \$ 0.4 Local:							
you already filed the returns and the tax years. State: \$ 0.4 Local: \$ 0.4 Local: \$ 0.4 Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Alimony: \$ 0 Maintenance: \$ 0 Support: \$ 0 Divorce settlement: \$ 0 Property settlement: \$ 0 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information	Yes.	Give specific infor	mation	and a factor of the factor of	Follow	Φ.	0.00
and the tax years	<u> </u>	you already filed th	ne returns			\$	0.00
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Alimony: \$ 0	6	and the tax years.		-		\$	0.00
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Alimony: Maintenance: Support: Divorce settlement: Property settlement: Divorce settlement: Property settlement: No Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information				A sea marginal of the sea as a second sea of the season of the season of the sea of the sea of the sea of the sea of the season	Local:	\$	0.00
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Yes. Give specific information			sum alimony	, spousal support, child sup	oort, maintenance, divorce settlement, property sett	lement	
Alimony: \$ 0 Maintenance: \$ 0 Support: \$ 0 Divorce settlement: \$ 0 Property settlement: \$ 0 Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	∠ No				., , , , , , , , , , , , , , , , , , ,		
Maintenance: \$ 0 Support: \$ 0 Divorce settlement: \$ 0. Property settlement: \$ Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ✓ No ∨ Yes. Give specific information	Yes. 0	Give specific inforn	nation	The state of the s			
Support: \$ 0. Divorce settlement: \$ 0. Property settlement: \$ Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information					•	\$	0.00
Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information						\$	0.00
Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information						\$	0.00
Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information						***************************************	0.00
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information	Other			And the second s	Property settlemen	t: \$	
✓ No Yes. Give specific information	Other am Examples	ounts someone d Unpaid wages, d	wes you isability insura	INCE navments disability ba-	nefite sick nav vacation now well and		
☐ Yes. Give specific information				Poymenta, disability bei	reina, акж рау, vacation pay, workers' compensati	on,	
	€2#	Social Security b	enefits; unpaid	d loans you made to someo	ic cise		
\$		Social Security D	enems, unpan	u loans you made to someou	ic disc		
The state of the s		Social Security D	enems, unpan	u loans you made to someou	(C GISC	I MANAGANA MARANA	0.00

Entered 11/30/16 11:30:32 Case 16-37765 Doc 1 Filed 11/30/16 Page 17 of 52 Document Michael W. Debtor 1 Allen Case number (if known First Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **No** ☐ Yes. Name the insurance company Company name: Beneficiary: of each policy and list its value... Surrender or refund value: 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☑ No Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe each claim. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No No Yes. Describe each claim....... 0.00 35. Any financial assets you did not already list No Yes. Give specific information...... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 0.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Mo No ☐ Yes. Describe.... 0.00 39. Office equipment, furnishings, and supplies

☐ Yes. Describe..

No.

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

0.00

Case 16-37765 Doc 1 Filed 11/30/16 Entered 11/30/16 11:30:32 Desc Main Page 18 of 52 Document Michael W. Allen Debtor 1 Case number (if known) First Name Midrite Nam 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **☑** No ☐ Yes. Describe.... 0.00 41. inventory No No Yes. Describe. 0.00 42. Interests in partnerships or joint ventures M No Yes. Describe...... Name of entity: % of ownership: 0.00 0.00 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 0.00 44. Any business-related property you did not already list No No ☐ Yes. Give specific 0.00 information 0.00 0.00 0.00 0.00 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

Mo. Go to Part 7. ☐ Yes. Go to line 47.		
	Current val portion you	ue of the
47. Farm animals	Do not deductor or exemptions	t secured claims s.
Examples: Livestock, poultry, farm-raised fish		
☑ No		
Yes		
	\$ \$	0.00

Entered 11/30/16 11:30:32 Case 16-37765 Doc 1 Filed 11/30/16 Desc Main Page 19 of 52 Document Michael \٨/ Debtor 1 Allen Case number (if kno First Name Last Name 48. Crops—either growing or harvested No. Yes. Give specific information...... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade 0.00 0.00 0.00 0.00 Describe All Property You Own or Have an Interest in That You Did Not List Above 0.00 0.00 0.00 0.00

✓ No. ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed No No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list Yes. Give specific information...... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 0.00 57. Part 3: Total personal and household items, line 15 1,300.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 0.00 1,300.00 62. Total personal property. Add lines 56 through 61. Copy personal property total 👈 1,300.00 63. Total of all property on Schedule A/B. Add line 55 + line 62..... 1,300.00

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Debtor 1	Michael	W.	Allen		
	First Name		Middle Name	Last Name	
Debtor 2					
Spouse, if filir	ng) First Name		Middle Name	Last Name	
Inited State	s Bankruptcy Co	urt for the:N	Northern District of Illino	ois	

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

2.	You are cla	aiming state and federal nonbant aiming federal exemptions. 11 U	.S.C. § 522(b)(2)	U.S.C. § 522(b)(3) ot, fill in the information below.	
	Brief descripti	ion of the property and line on that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
7	Brief description: Line from	2003 GMC Envoy	\$0.00	\$ 2,400.00 2 100% of fair market value, up to	735 ILCS 5/12-1001(c)
	Schedule A/B:	3.1		any applicable statutory limit	
	Brief description: Line from	Household Furniture	\$800.00	☑ \$ 800.00 ☐ 100% of fair market value, up to	735 ILCS 5/12-1001(b)
	Schedule A/B: Brief			any applicable statutory limit	
	description: Line from Schedule A/B;	Electronics 7	\$400.00	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	735 ILCS 5/12-1001(b)
	(Subject to adjus ☑ No		ears after that for cases	filed on or after the date of adjustment.) ,215 days before you filed this case?	

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Debtor 1

Michael W. Allen
First Name Middle Name Last Name

Case number (if known)_____

on Schedule A	on of the property and line I/B that lists this property	portion	value of the you own		of the exemption you claim	Specific laws that allow exempti
No.		Copy th Schedu	e value from le A/B	Check or	ly one box for each exemption	
Brief description:	Clothings	\$	100.00	4 \$	100.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11			100% any a	of fair market value, up to applicable statutory limit	
Brief description:		\$	7.11	- \$		
Line from Schedule A/B;				any a	of fair market value, up to pplicable statutory limit	
Brief description:						
Line from Schedule A/B:				1 00%	of fair market value, up to pplicable statutory limit	-
Brief description:		\$		□ \$		
Line from Schedule A/B:					of fair market value, up to opticable statutory limit	
Brief description:		\$		- \$	***************************************	
ine from Schedule A/B:				any ar	of fair market value, up to oplicable statutory limit	
Brief description:				□ s		······································
ine from Schedule A/B:				201/20	of fair market value, up to oplicable statutory limit	
Brief lescription:		\$		- \$		
ine from Schedule A/B:		·			of fair market value, up to plicable statutory limit	
Brief escription: -	***************************************	\$	····	□ \$		a managar i i i i i i i i i i i i i i i i i i i
ine from Schedule A/B: -				any ap	of fair market value, up to plicable statutory limit	
rief escription: -		\$		Q \$		
ne from chedule A/B: "				100% o any ap	of fair market value, up to plicable statutory limit	
rief escription:		\$	A	u s	The transfer of the second of	
ne from chedule A/B:				100% c any ap	of fair market value, up to olicable statutory limit	
rief escription: –		\$		□ \$	- 100-000 100 1 100 100 100 100 100 100	
ne from chedule A/B: —	THE STATE OF THE S			100% o any app	f fair market value, up to dicable statutory limit	
rief escription: –	14 Augusta	\$		 \$		
ne from				☐ 100% o	f fair market value, up to licable statutory limit	

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First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name	
Spouse if filing) First Alpma	
(Spouse if filing) First Name	
(Spoose, it mang) First Name Last Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	M

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do	any	creditors	have	claims	secured	by your	property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

As much as possible, list the claims in alpl	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Markoff Law LLC	Describe the property that secures the claim:	\$6,080.00	\$6,080.00	0.00
Creditor's Name 29 North Wacker Drive #550 Number Street	Wage Deduction Notice - Overland Bond & Investment			
Chicago IL. 60606 City State ZiP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	□ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt Date debt was incurred 12/13/2016	Other (including a right to offset)			
	Last 4 digits of account number 8 3 5 2	continuency is special representation of the property of the continuency property of t	NA NASAMPANIPANIPANINA MARITA KANISAPANIA MARINA MARITAKA KANISAKA MARITAKA MARITAKA MARITAKA MARITAKA MARITAK	nnatorio de compresso de la compressió de la compresió de la compressió de la compresió de la compresió de la compressió de la compressió de la compressió de l
Santander Consumer USA Creditor's Name	Describe the property that secures the claim:	\$ 12,078.00	\$ 12,078.00 _{\$}	0.00
P O Box 961245				
Number Street				
	As of the date you file, the claim is: Check all that apply.	•		
Fort Worth TX 75161	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			;
Date debt was incurred 07/06/2013	Last 4 digits of account number 8 3 5 2			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	18,158.00	and a design of the quality construction of the design of the design of the present of the design of	arraman makaman barraman na manan manan da mana
to the second se	, ,			4

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Fill in this i	nformation to ide	ntify your case:		
Debtor 1	Michael	W.	Allen	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	I) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Northern District of II	llinois	2
Case number (if known)				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

any	/ additional pages, write your name and case n	umber (if known).		w .	9	top of
Pa	rt 1: List All of Your PRIORITY Unsecu	red Claims				
2.	nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list the factain has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's not part 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim here a	nd show	both priority than two prices in Part 3.	
2.1	IRS - Bankruptcy Team Priority Creditor's Name Department of the Treasury Number Street	Last 4 digits of account number 8 3 5 2 When was the debt incurred?	\$8,000.0	amo	unt am	ount
man torre e e e e e e e e e e e e e e e e e e	Fresno CA 93888 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify				
2.2	Priority Creditor's Name Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply	*) \$	0.00 \$	0.00
	City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify				

Michael

Document

Page 24 of 52 Case number (if known)

Debtor 1

First Name Middle Name

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority us No. You have nothing to report in the					
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre	d claims in ditor separa ditor holds	the alphabetica	il order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not , list the other creditors in Part 3.If you have more than three no	list clai	ms already
	1				Total	l claim
1	FingerHut/Webbank			Last 4 digits of account number 1 1 4 0		176.00
	Nonpriority Creditor's Name 6250 Ridgewood Rd Number Street			When was the debt incurred? 04/05/2015	\$	170.00
	Number Street Saint Cloud	MN	56303			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only			☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a commu	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? ☑ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account		
2	Overland Bond And Investmer	nt Attn: R.	J. Nicpon	Last 4 digits of account number 0 0 0 8	\$	6,246.00
	Nonpriority Creditor's Name 4701 W. Fullerton Ave Number Street		F	When was the debt incurred? 06/21/2012		
	Chicago	IL	60639	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another			☐ Student loans		
	Check if this claim is for a commu	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? ☑ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile		
	LVNV Funding	neer are no trop of a trop to a season	and the second site of the second	Last 4 digits of account number $\phantom{aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$		176.00
	Nonpriority Creditor's Name P O BOX 10497, Ste 110, Ms	576		When was the debt incurred? 01/28/2016	\$	
	Number Street Greenville	sc	29603	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
	Debtor 1 only Debtor 2 only			☐ Disputed		an ordered
	Debtor 2 only Debtor 1 and Debtor 2 only			Two (NONDONDITY was a seed of the		
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		and the state of t
	☐ Check if this claim is for a commun	nity debt		 ☐ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? ✓ No			□ Debts to pension or profit-sharing plans, and other similar debts □ Other, Specify Collection Account		
	Yes			other, Specify Odneotion Account		The second secon

Debtor 1

Michael

Dବ୍ଲୟୁment

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Case number (# known)

Middle Name Last Name

Part 2:	Your NONPRIORITY	Unsecured Claims —	Continuation Pa	ıge
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Γ.	ter listing any entries on this page, number	them beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
4.4	Crandon Emergency Physicians Nonpriority Creditor's Name		Last 4 digits of account number 1 5 7 4	\$ 2,747.0
	8012 S Crandon Ave		When was the debt incurred? 03/01/2015	-
1	Number Street Chicago IL	60617	As of the date you file, the claim is: Check all that apply.	
and the same and t	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community de is the claim subject to offset? No Yes	ZIP Code	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical 	
4.5	South Shore Hospital	et liste get ander de meter entre liste des get en de la militer de la militeration de la	Last 4 digits of account number $8\ 3\ 5\ 2$	\$ 20,000.Q
	Nonpriority Creditor's Name 8012 S. Crandon Ave		When was the debt incurred? 11/01/2016	_
	Number Street Chicago IL	60617	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debts the claim subject to offset? No Yes	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical	
1.6	AT&T Mobility	terminustumed Silling silling of tradesizindes Silvensverkhimskiphyd Algerians ferspanning	Last 4 digits of account number <u>8</u> <u>3</u> <u>5</u> <u>2</u>	\$_1,000.00
	P O BOX 6416		When was the debt incurred? 11/01/2016	
	Number Street Carol Stream IL	60197	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that 	
í	☐ Check if this claim is for a community debt is the claim subject to offset? ☑ No ☐ Yes		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cellular	

Debtor 1

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Middle Name

Case number (if known)_

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this page, num	ber them beginning wi	th 4.4, followed by 4.5, and so forth.	Total clain
Sprint Wireless		Last 4 digits of account number 8 3 5 2	<u>\$ 1,</u> 000.0
Nonpriority Creditor's Name 6391 Sprint Parkway		When was the debt incurred? 11/01/2016	
Number Street Overland Park	KS 66251	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	tate ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
☐ At least one of the debtors and another ☐ Check if this claim is for a community Is the claim subject to offset? ☑ No ☐ Yes	y debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cellular 	
T-Mobile Bankruptcy Team	Budderfolk (Friefenskrikling) postunery v them 5/5 = 1/8% decendable annumge	Last 4 digits of account number 8 3 5 2	\$ <u>1,500.0</u>
Nonpriority Creditor's Name P O BOX		When was the debt incurred? 11/01/2016	
Number Street Chicago	L 60617	As of the date you file, the claim is: Check all that apply.	
	ate ZIP Code	Contingent	
Who incurred the debt? Check one. Debtor 1 only		Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	debt debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No ☐ Yes		☑ Other. Specify Medical	
City Of Chicago Dept. Of Finance	Priter of the attention and the second and an active of all angular part and and active part, as an appropriate,	Last 4 digits of account number 8 3 5 2	\$ 400.0
P O BOX 4641		When was the debt incurred? 11/01/2016	
Number Street Chicago IL	60680	As of the date you file, the claim is: Check all that apply.	
State Who incurred the debt? Check one.	te ZIP Code	Contingent Unliquidated Disputed	
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community s the claim subject to offset? ☐ No ☐ Yes	debt	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tickets, Fines & Fees	

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Debtor 1

Middle Name

Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

		55125 ZIP Code	Last 4 digits of account number 8 3 5 2 When was the debt incurred? 11/01/2016 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Notice Only Last 4 digits of account number 8 3 5 2 When was the debt incurred? 11/01/2016	\$
7805 Hudson Rd Number Street Woodberry A Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community is the claim subject to offset? No Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	tate		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
Woodberry City Str Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community is the claim subject to offset? ✓ No Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	tate		☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community Is the claim subject to offset? ☐ No ☐ Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	tate		☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community Is the claim subject to offset? No Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	y debt		Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community Is the claim subject to offset? ☑ No □ Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	y debt	Andrew Sid worken is Aggree for propriet sinker in the contract of southern in the contract of sinker in the contract of s	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
At least one of the debtors and another Check if this claim is for a community is the claim subject to offset? No Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	y debt	h Malan villa kanden fi. A april tips groupe dishelan	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
Check if this claim is for a community is the claim subject to offset? No Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	y debt	er haya va siid ka salam haya er ey sereya siidaa ka ka salam ka salam ka salam ka salam ka salam ka salam ka s	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	S
Is the claim subject to offset? No Yes Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	y debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only Last 4 digits of account number 8 3 5 2	\$
Equifax Bankruptcy Dept. Nonpriority Creditor's Name P.O. Box 740241	of the state of th	n kajar visit gadar kilajar bir geografiskasi.	Last 4 digits of account number 8 3 5 2	\$
Nonpriority Creditor's Name P.O. Box 740241	Park (Marie La Villa munic ser described an	n kapar (v stá á seidenti hágar frag argusa kapása é v		\$
Nonpriority Creditor's Name P.O. Box 740241				\$
			When was the debt incurred? 11/01/2016	
AD11001 201660				
Atlanta G	SA .	30374	As of the date you file, the claim is: Check all that apply.	
Dity Stat		IP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONDRIORITY upon average at a least	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another			Student loans Obligations pricing out of a consulting pri	
Check if this claim is for a community i	debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
No Yes			☑ Other Specify Notice Only	
Transferred and analysis of the control of the cont	electrony, activities of a second or think a second	t dieder gety order 1924 Borothors promonegos francos professor (samples et samples et samples et samples et s		stan-vergensingensame.
xperian Bankruptcy Dept.			Last 4 digits of account number 8 3 5 2	\$
onpriority Creditor's Name O. Box 2002 umber Street			When was the debt incurred? 11/01/2016	
Allen TX	< 7	75013	As of the date you file, the claim is: Check all that apply.	
State State		P Code	☐ Contingent	
/ho incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another			 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a community d	debt		you did not report as priority claims	
the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Notice Only	
í No			Cules Specify INOTICE Office	

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Document

Debtor 1

Michael First Name

Middle Name

Case number (# known)___

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Trans Union Bankruptcy Dep	t.		Last 4 digits of account number _	8 3 5 2	\$
P O BOX 1000 Number Street			When was the debt incurred?	11/01/2016	
Chester	PA	19022	As of the date you file, the claim is	s: Check all that apply.	
City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured Student loans	d claim:	
☐ Check if this claim is for a commus s the claim subject to offset? No ☐ Yes			Obligations arising out of a separat you did not report as priority claims Debts to pension or profit-sharing p Other. Specify Notice Only	i e	
Certegy Check Service	ffilially and amount program was similar to	egenera i sunio n. ir respunjata diploidi iš sigriperija sigriperija sigriperija spessija spessija spessija s	Last 4 digits of account number _8	3 <u>3 5</u> <u>2</u>	na argund dunch magan d'um d'an a strucche.
ionpriority Creditor's Name 2.O. Box 30046			When was the debt incurred? 1	1/01/2016	
umber Street 「ampa	FL	33630	As of the date you file, the claim is:	: Check all that apply.	
ity	State	ZIP Code	Contingent		
the increased the debte of the			☐ Unliquidated		
/ho incurred the debt? Check one.			☐ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured	claim:	
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and another			Obligations arising out of a separation	on agreement or divorce that	
Check if this claim is for a commun	nity debt		you did not report as priority claims	on agreement of divorce that	
	mey debt		Debts to pension or profit-sharing pla	ans, and other similar debts	
the claim subject to offset? No Yes			☑ Other. Specify Notice Only		
amen digat fire haling digatakan kan kan digatak digatak digatak ng mengangan kan ng manggunan yang digat diga	Self-Addition Signature (see and transformation)	ym enn pravillifebilgsydd lllallinus, norga faws, abgelld lldilllindi	Last 4 digits of account number	TO THE OTHERS COME THE SHEET WAS AND THE SHEET COMMITTEE AND THE SHEET WAS AND	\$
npriority Creditor's Name			When was the debt incurred?		
mber Street			As of the date you file, the claim is:	Check all that apply.	
у	State	ZIP Code	Contingent Unliquidated		
ho incurred the debt? Check one.			Disputed		
Debtor 1 only			Operated		
Debtor 2 only			Type of NONPRIORITY unsecured of	claim:	
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and another			Obligations arising out of a separation	a agreement or discovery that	
Check if this claim is for a commun.	ity deht		you did not report as priority claims	r agreement or divorce that	
	, 4601		Debts to pension or profit-sharing plai	ns, and other similar debts	
the claim subject to offset? No			Other. Specify	VVIoleta	

Debtor 1

Michael First Name

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Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Phoenix Financial Se	ervices		On which entry in Part 1 or Part 2 did you list the original creditor?
8902 Otis Ave Ste 10)3A		Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Indianapolis	IN State	46216 ZIP Code	Last 4 digits of account number 1 5 7 4
Commonwealth Finar	and the and increase and and construction.	A Signal of Administration programmers of	On which entry in Part 1 or Part 2 did you list the original creditor?
245 Main St. Number Street			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Dickson City City	PA State	18519 ZIP Code	Last 4 digits of account number 2 6 9 4
Markoff Law LLC. Ro	bert G. Marko	ff	On which entry in Part 1 or Part 2 did you list the original creditor?
29 N. Wacker Drive #	\$550		Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	IL State	60606 ZIP Code	Last 4 digits of account number 0 2 5 4
Name	State	ZIP COGE	On which entry in Part 1 or Part 2 did you list the original creditor?
Jumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ity	State	ZIP Code	Last 4 digits of account number
Jame			On which entry in Part 1 or Part 2 did you list the original creditor?
lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ity	State	ZIP Code	Last 4 digits of account number
ame		THE PERSON NAMED IN A REAL PROPERTY OF THE PERSON NAMED IN THE PER	On which entry in Part 1 or Part 2 did you list the original creditor?
umber Street		····	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ity	State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
umber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
At y	State	ZIP Code	Last 4 digits of account number
	en e		Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims

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Debtor 1

Michael First Name

W. Middle Nami Allen

Case number (# known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	8,000.00
	6с	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e.	. Total. Add lines 6a through 6d.	6e.	\$	8,000.00
AND THE STATE				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	0.00
Total claims from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		\$	
from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

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Debtor	Michael	W.	Allen	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse If filing)	First Name	Middle Name	Last Name	
Jnited States	Bankruptcy Court for	the: Northern District of Illi	nois	
Case number				

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, ceil phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	m				•	the state of the s
	Person (or company w	ith whom you	ı have the contract or lease	State what the contract or lease is for	
2.1						
	Name					
	Number	Street	· · · · · · · · · · · · · · · · · · ·		Transient.	
	City		State	ZIP Code		
2.2	A DATE DE S ANS A ESPA DESENVENAMENTO DAS	koj tili komit na semilika koji tili je sedi. A dojenili me A de Bistoriji A V Çinizinili,	\$1 - MATERIAL MOTERNIS (\$1 A MINERAL AND MESSA) AND SAND S	લહેલના અને હેલા પણ નાજ નાજ નાજના દાવદાંને અને કનને અને નાજાંદાર મે પણ લાખકે નાજે લાગ પ્રદાસાં કરે ન શકે ભાગને હાલ દરિન્દ માંક હોંગ નહે અંદાવનો	with the control of the second second control of the control of th	gen Kop Parado S (Kalamaia C C Parado) (Kalamaia C C Parado) (Kalamaia C R Parado) (Kalamaia C C Parado) (Kalamaia C
Yr. Game.	Name					
	Number	Street	· · · · · · · · · · · · · · · · · · ·			
2.3	City	Martine is returned in the action of the contract of the contr	State	ZIP Code		erin Maria kan kan kan kan kan kan kan kan kan ka
2.5	Name		444		_	
	Number	Street				
emorale.	City	Primarily week are a money company to depot a second	Slate	ZIP Code		
2.4				And the second s	大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大	وي د و و و د و د و د و د و د و د و د و د
	Name		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4,		
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Surgery	City		State	ZIP Code	Tanga (A. A. 1904) (Ini. and A. A. 1904) (Ini. and	
2.5	N.				The state of the s	rikket anter die eine Verschaften voor de verschaften verschaft de verschaft de verschaft de verschaft de verschaften verschaft de verschaften verscha
	Name					
	Number	Street				
	City	······································	State	ZIP Code	MANIP	

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Debtor 1	Michael	W.	Allen
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if fili	ng) First Name	Middle Name	Last Name
Inited State	s Bankruptcy Court for	the: Northern District of Illi	inois

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

. Doyouh ☑ No	nave any codebtors? (If you	u are filing a joint case, do r	not list either spouse as	a codebtor.)
☐ Yes				
	he last 8 vears, have you li	ved in a community prope	ortu otata an tamita	(Community property states and territories include
Arizona,	California, Idaho, Louisiana	, Nevada, New Mexico, Pue	erto Rico, Texas, Washi	(Community property states and territories include ington, and Wisconsin)
☑ No. 0	3o to line 3.			Service Control of the Control of th
Yes.	Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?	
U N				
LI Y	es. In which community stat	te or territory did you live?	, ,	Fill in the name and current address of that person.
N	Name of your spouse, former spouse,	or legal equivalent		
Ñ	√umber Street			
_	N.			
C	iy	State	ZIP Code	
Schedule Schedule	i ime z again as a codebto	er only if that person is a g schedule E/F (Official Form	uarantor or cosigner.	f your spouse is filing with you. List the person Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D,
Schedule Schedule Column	e D (Official Form 106D), Se E/F, or Schedule G to fill	er only if that person is a g schedule E/F (Official Form	uarantor or cosigner.	Make sure you have listed the creditor on
Schedule Schedule Column	e D (Official Form 106D), Se E/F, or Schedule G to fill	er only if that person is a g schedule E/F (Official Form	uarantor or cosigner.	Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de
Schedule Schedule Column	e D (Official Form 106D), Se E/F, or Schedule G to fill	er only if that person is a g schedule E/F (Official Form	uarantor or cosigner.	Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line
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Schedule Schedule Column Name Number City Name Number	sime 2 again as a codebto e D (Official Form 106D), S e E/F, or Schedule G to fill 1: Your codebtor	or only if that person is a g ichedule E/F (Official Form out Column 2.	uarantor or cosigner. 106E/F), or Schedule	Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line
Schedule Schedule Column Name Number City Name	sime 2 again as a codebto e D (Official Form 106D), S e E/F, or Schedule G to fill 1: Your codebtor	or only if that person is a g ichedule E/F (Official Form out Column 2.	uarantor or cosigner. 106E/F), or Schedule ZIP Code	Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line
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Schedule Schedule Column Name Number City Name Number	sine 2 again as a codebto e D (Official Form 106D), S e E/F, or Schedule G to fill 1: Your codebtor Street	or only if that person is a g ichedule E/F (Official Form out Column 2.	uarantor or cosigner. 106E/F), or Schedule ZIP Code	Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line

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Fill in this information to iden	tify your case:					
Debtor 1 Michael	W. Allen					
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Lasi Name	····			
United States Bankruptcy Court for the	he: District of _					
Case number(If known)				Check if this	is:	
		· · · · · · · · · · · · · · · · · · ·		An ameno		
Official Form 106I				A supplen income as	nent showing p of the following	oostpetition chapter 13 ng date:
Schedule I: Yo				MM / DD /	YYYY	
e as complete and accurate as						12/15
upplying correct information. It you are separated and your speparate sheet to this form. On the Part 1: Describe Employ	the top of any additional p	ages, write your	name and case nu	your spouse. umber (if know	if more space (n). Answer eve	is needed, attach a ry question.
Fill in your employment information.		Debtor 1			Debtor 2 or no	n-filing spouse
If you have more than one job, attach a separate page with		And the second s	and the state of 		With the Control of t	The state of the s
information about additional employers.	Employment status	Employed			Employed	
Include part-time, seasonal, or self-employed work.		☐ Not emplo	oyed		Not employe	ed
Occupation may include studer or homemaker, if it applies.	Occupation it	Maintance			***************************************	
	Employer's name	IBF Propert	y Management	L.L.C		
•	Employer's address	3324 West I	North Avenue			
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		City	State ZIP Code	e Cit	у	State ZIP Code
	How long employed the	re?	<u> </u>			
art 2: Give Details Abou	ıt Monthly income					
Estimate monthly income as o	of the date you file this for	m If you have not	hing to concert for			
	- ·					
If you or your non-filing spouse it below. If you need more space,	nave more than one employe attach a separate sheet to th	ar, combine the infairs form.	formation for all em	ployers for that	person on the l	nes
List monthly gross wases	dans and committee to the		For Del	Charles Walk	or Debtor 2 or on-filing spouse	
List monthly gross wages, sa deductions). If not paid monthly	rery, and commissions (be r, calculate what the monthly	логе all payroll wage would be.	^{2.} s 2,00	0.00	¢	
Estimate and list monthly over	ertime pay.		* *************************************	0.00 +	\$	
Calculate gross income. Add I	line 2 + line 3.		4. \$ 2,00		5	7
	may e y en common contra e estama amona agit e communant e estatuen amona			L		_

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Debtor 1	1 Michael	W.	Allen Last Name		Ca	se number (# known)	
	, not think	Andrew County	rest vening					
					For	Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here			→ 4.	\$	0.00	\$	
5. List	all payroll dec	fuctions:						
5а	. Tax, Medicar	e, and Social Secu	urity deductions	5a.	\$	0.00	\$	
5b	. Mandatory c	ontributions for re	tirement plans	5b.	\$	0.00	\$	
5c	. Voluntary co	ntributions for ret	irement plans	5c.	\$	0.00	\$	
5d	. Required rep	ayments of retirer	nent fund loans	5d.	\$	0.00	\$	
5e	. Insurance			5e.	\$	0.00	\$	
5f.	Domestic su	pport obligations		5f.	\$	0.00	\$	
5g	. Union dues			5g.	\$	0.00	\$	
5h.	. Other deduct	tions. Specify: n/a		5h.	+\$	0.00	+ \$	
6. A d	ld the payroll o	l eductions . Add lin	es 5a + 5b + 5c + 5d + 5e +5f + 5g + 5r	i. 6.	\$	0.00	\$	
7. C a	iculate total m	onthly take-home	pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	
8. L.is 1	t all other inco	me regularly recei	ved:					
8a.	Net income fi profession, o		y and from operating a business,					
	Attach a state receipts, ordin monthly net in	ary and necessary	erty and business showing gross business expenses, and the total	8a.	\$	0.00	\$	
8b.	Interest and o			8b.	\$	0.00	\$	
8c.	Family supportegularly rece		you, a non-filing spouse, or a depend		V	n == 14 * Ap (Parch Parcher	V-04440-04-04-04-04-04-04-04-04-04-04-04-	
	Include alimor settlement, an	ny, spousal support, d property settleme	child support, maintenance, divorce nt.	8c.	\$	0.00	\$	
8d.	Unemployme	nt compensation		8d.	\$	0.00	\$	
8e.	Social Securi	ty		8e.	\$	0.00	\$	
8f.	Include cash a that you receive	ssistance and the v	hat you regularly receive value (if known) of any non-cash assista mps (benefits under the Supplemental housing subsidies.	nce 8f.	\$	0.00	\$	
80	Pension or re	tirement income				0.00	-	
_			n/o	8g.	\$	***************************************	\$	
8h.	Other monthly	y income. Specify:	11/a	8h.	+\$	0.00	+\$	
			8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	
10. Caic Add	the entries in li	income. Add line 7 ne 10 for Debtor 1 a	' + line 9. and Debtor 2 or non-filing spouse.	10.	\$	2,000.00	\$	\$ 2,000.00
inclu			to the expenses that you list in Sche d partner, members of your household,			its, your roomm	ates, and other	**************************************
Do r Spe	not include any a cify: <mark>n/a</mark>	amounts already inc	cluded in lines 2-10 or amounts that are	not av	ailable t	o pay expenses	s listed in Schedule J. 11. +	\$ 0.00
12. Add	the amount in	the last column o	f line 10 to the amount in line 11. The	result	is the co	ombined month	ly income.	
Write	e that amount o	n the Summary of 1	Your Assets and Liabilities and Certain S	Statisti	cal Infor	nation, if it appl	ies 12.	\$ 2,000.00 Combined
13. Do :	you expect an No.	increase or decrea	ase within the year after you file this	form?				monthly income
	Yes. Explain:							

Fill in this information to identify	y your case:			
Debtor 1 Michael W		Chaoli if this	·	
First Name Debtor 2	Middie Name Last Name	Check if this		
(Spouse, if filing) First Name	Middle Name Last Name	An amend	-	petition chapter 13
United States Bankruptcy Court for the:	Northern District of Illinois		as of the following	
Case number (If known)		MM / DD/	YYYY	
Official Form 106J				
Schedule J: Yo	ur Fynansas			
Be as complete and accurate as p	ossible. If two married people are fil led, attach another sheet to this forn	ing together, both are equally resp n. On the top of any additional pag	oonsible for supply les, write your nam	ing correct e and case number
Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
✓ No ☐ Yes. Debtor 2 must fil	ie Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	☐ No		PT Mid-Mills and homeone an ampropry program that I had dead conducte a personney program in the Control of the	errado de faces en emprejo per Ballet I 171 ha faces en empre II-37-5 com em em la prom
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.				☐ No ☐ Yes
		Printed and a second a second and a second a		☐ No ☐ Yes
			-	□ No □ Yes
		····		□ No
				☐ Yes
PERSON massed at communication assessment and applications are considered as a communication of the communication and communication are communicative as a communicative and communicative are communicative as a communicativ				☐ No ☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☐ No ☐ Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses	The state of the s	er i en speriografie en statutation properties en section de la companya de la companya de la companya de la c	
Estimate your expenses as of your	bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme	re using this form as a supplemen ental <i>Schedule J</i> , check the box at	t in a Chapter 13 c the top of the form	ase to report and fill in the
	-cash government assistance if you			
	it on Schedule I: Your Income (Offic	•	Your exper	ises
any rent for the ground or lot.	expenses for your residence. Include		4. \$	378.00
If not included in line 4:				:
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or re			4b. \$	0.00
4c. Home maintenance, repair, a		•	4c. \$	0.00
4d. Homeowner's association or	condominium dues		4d. \$	0.00

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Debtor 1 Michael W. Allen Case number (# known) Last Name

			Your e	xpenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	140.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d. Other. Specify: n/a	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	¢	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	0.00
10.	Personal care products and services	10.	¢	90.00
11.	Medical and dental expenses	11.	\$	0.00
12.	_		Ψ	
	Do not include car payments.	12.	\$	140.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
14.	Charitable contributions and religious donations	14.	\$	120.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		1	
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$ \$. 0.00
	15c. Vehicle insurance	15c.	\$	110.00
	15d. Other insurance. Specify: n/a	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	438.00
	17b. Car payments for Vehicle 2		\$	0.00
	17c. Other, Specify: n/a	17b.	\$	0.00
	17d. Other. Specify: n/a	17c.	\$\$	0.00
10		17d.	Φ	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18,	\$	0.00
19.	Other payments you make to support others who do not live with you. Specify: n/a	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ıe.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	Michael First Name	W. Middle Name	Allen Last Name	Cas	e number (# <i>known</i>)	W	
21. Oth	er. Specify: <u>n/a</u>		1970		21.	+\$	0.00
2. Calc	ulate your mon	thly expenses.					
22a.	Add lines 4 throu	ugh 21.			22a.	\$	1,901.00
22b.	Copy line 22 (mo	onthly expenses f	or Debtor 2), if any, from Officia	al Form 106J-2	22b.	\$	0.00
22c.	Add line 22a and	l 22b. The result i	s your monthly expenses.		22 c.	\$	1,901.00
3. Calcu	iate your month	nly net income.					
23a.	Copy line 12 (yo	our combined mor	thly income) from Schedule I.		23a.	\$	2,000.00
23b.	Copy your mont	hly expenses fron	ı line 22c above.		23b.	- \$	1,901.00
		onthly expenses f or monthly net inco	rom your monthly income. ome.		23c.	\$	99.00
			e in your expenses within th				
For ex mortga	ample, do you e age payment to it	xpect to finish pay ncrease or decrea	ing for your car loan within the se because of a modification to	year or do you expect yo the terms of your mort	our gage?		·
No.		di barrina a a a rang di kali na ang samanang nganggal na ana an	mana tahunin his sa	Mar concentration and a figurate polymer polymer construction and a finite contraction and an according to the		e en alla d'un romant de la company (en al grande pour pour	en e
	LAPIGITITE	ie,					
		and a section of the color of a common special parties of the base and mayor compare					

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Debtor 1	Michael	W.	Allen	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E Case number (If known)	Bankruptcy Court for	the: Northern District of III	linois	

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below			
Did you	u pay or agree to pay so	neone who is NOT an a	attorney to help you fill out bankruptcy forms?	
☑ Yes	i. Name of person	Veronica Eason	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
Under potential that the	penalty of perjury, I declary are true and correct.		summary and schedules filed with this declaration and	
Signatu Date <u>/</u>	re of Debtor 1		Signature of Debtor 2 Date	to the second se

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First Name Middle Name Last Name
Debtor 2 Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois
Mind states build uptcy court for the. Notthern bistrict of filliflois
Case number (If known)
i Niowij

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Mot married 2. During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 Debtor 2: **Dates Debtor 2** lived there lived there Same as Debtor 1 Same as Debtor 1 From From Number Street То Τo City State ZIP Code City State ZIP Code ☐ Same as Debtor 1 Same as Debtor 1 Number Τo To City State ZIP Code ZIP Code Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ☐ No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

Explain the Sources of Your Income

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101	ichael Irst Name M		Allen asi Name	. Case n	umber (# known)	
Did you b	ave any inco-	no from complete				
	colar arribarit G	i income you receiv	ent or from operating a t red from all jobs and all bu come that you receive tog	Sinesses including part-t	ar or the two previous cale ime activities. der Debtor 1.	endar years?
□ No	ill in the details					
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From the da	January 1 of ate you filed f	current year until or bankruptcy:	Wages, commissions bonuses, tips	\$2,000.00	Wages, commissions, bonuses, tips	\$
	** *****************		Operating a business	·	Operating a business	
	st calendar y		Wages, commissions bonuses, tips	\$ 23,060.00	Wages, commissions, bonuses, tips	¢
(Janua	ary 1 to Decen	nber 31, <u>2014</u>) D Operating a business		Operating a business	Φ
For the	e calendar ye	ar before that:	Wages, commissions bonuses, tips		☐ Wages, commissions,	to the entropy makes one species as a
	351 1 to Dane	ber 31,2015	.) Doperating a business	\$\$24,211.00	bonuses, tips Operating a business	\$
hid you red nolude inco nemploym ambling ar	ceive any oth ome regardles nent, and other nd lottery winn	er income during sof whether that in public benefit payrings. If you are filin	this year or the two prev come is taxable. Example nents; pensions; rental ind g a joint case and you hav	ious calendar years? s of other income are alin come; interest; dividends; e income that you receive	nony; child support; Social S money collected from laws ed together, list it only once	.:
Pid you reconclude inconnemployme ambling are ist each so	ceive any oth ome regardles nent, and other nd lottery winn ource and the	er income during sof whether that in public benefit payrings. If you are filingross income from	this year or the two prev come is taxable. Example ments; pensions; rental inc	ious calendar years? s of other income are alin come; interest; dividends; e income that you receive	nony; child support; Social S money collected from laws ed together, list it only once	.:
Pid you reconclude inconnemployme ambling are ist each so	ceive any oth ome regardles nent, and other nd lottery winn	er income during sof whether that in public benefit payrings. If you are filingross income from	this year or the two prev come is taxable. Example nents; pensions; rental ind g a joint case and you hav	ious calendar years? s of other income are alin come; interest; dividends; e income that you receive	nony; child support; Social S money collected from laws ed together, list it only once	.:
id you reconclude inconemploymambling are streach so	ceive any oth ome regardles nent, and other nd lottery winn ource and the	er income during sof whether that in public benefit payrings. If you are filingross income from	this year or the two prev come is taxable. Example ments; pensions; rental ind g a joint case and you hav each source separately. D	ious calendar years? s of other income are alin come; interest; dividends; e income that you receive	nony; child support; Social S money collected from lawsi ed together, list it only once t you listed in line 4.	Standard 101
id you reconclude inconcemploymembling are streach so No Yes. Fill	ceive any othome regardles nent, and other nd lottery winn purce and the lin the details.	er income during sof whether that in public benefit payrings. If you are filingross income from	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions) \$\begin{align*} \text{ous calendar years?} \\ \text{s of other income} are aling the properties of the come that you receive the come that	mony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of Income	Gross income from each source (before deductions and
id you reconclude inconnemploymembling arrist each so No Yes. Fill	ceive any othome regardles nent, and other nd lottery winn purce and the lin the details.	er income during sof whether that in public benefit payr ings. If you are filingross income from	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions) \$\int 0.00 \\ \delta 0.00 \\ \	mony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of Income	Gross income from each source (before deductions and
id you reconclude inconcemploymembling are streach so No Yes. Fill	ceive any othome regardles nent, and other nd lottery winn purce and the lin the details.	er income during sof whether that in public benefit payrings. If you are filingross income from	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions) \$\begin{align*} \text{ous calendar years?} \\ \text{s of other income} are aling the properties of the come that you receive the come that	mony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of Income	Gross income from each source (before deductions and
Pid you reconclude inconcemploymambling are ist each so Yes. Fill	ceive any othome regardles nent, and other nd lottery winn purce and the lin the details.	er income during sof whether that in public benefit payrings. If you are filingross income from gross income from the current year until or bankruptcy:	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions) \$\int 0.00 \\ \delta 0.00 \\ \	mony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of Income	Gross income from each source (before deductions and
From .	ceive any other ome regardles hent, and other nd lottery winn ource and the distribution of the details.	er income during so of whether that in public benefit payrings. If you are filingross income from gross income from current year until or bankruptcy:	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions) \$ 0.00 \$ 0.00	mony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of Income	Gross income from each source (before deductions and
From .	ceive any othome regardles nent, and other nd lottery winn ource and the lin the details. January 1 of our you filed for the you filed for the calendar years.	er income during sof whether that in public benefit payrings. If you are filingross income from current year until or bankruptcy:	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions) \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$	mony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of Income	Gross income from each source (before deductions and
Pid you reconclude incomploymer ist each so Yes. Fill From the data (Januar Januar Jan	ceive any other ome regardles hent, and other nd lottery winn ource and the distribution of the details. January 1 of the you filed for st calendar years 1 to December 1 of the details of the you filed for the young	er income during so of whether that in public benefit payrings. If you are filingross income from gross income from current year until or bankruptcy:	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross income from each source (before deductions) \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	nony; child support; Social S money collected from lawsred together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions) \$
Pid you reconclude incount property income playmoling arrains and the control of	ceive any other ome regardles hent, and other nd lottery winn ource and the distribution of the details. January 1 of the you filed for st calendar years 1 to December 1 of the details of the you filed for the young	er income during is of whether that in public benefit payrings. If you are filingross income from gross income from the public benefit payres income from the public benefit payres income from gross income from the public benefit payres income from the public benefit payres in	this year or the two prev come is taxable. Example ments; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of Income Describe below.	Gross income from each source (before deductions) \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	nony; child support; Social S money collected from lawsred together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions and

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or i	First Name	Middle Name	Lasi Name		Case n	umber (if known)	
rt 3:	List Certain	Payments Yo	ou Made Befor	re You Filed for	Rankruntev		
							NOTE: THE PERSON NAMED IN COLUMN 1
Are eit	her Dehtor 1's o	or Debtor 2's de	ahta arimasika	onsumer debts?			
	"incurred by ar	ı individual prim	arily for a persor	consumer debts. nal, family, or house	Consumer debts are shold purpose."	defined in 11 U.S.C. § 1	01(8) as
					ny creditor a total of \$	\$6,425* or more?	
	No. Go to I	ine 7.					
	Yes. List be	elow each credi	tor to whom you	paid a total of \$6.4	25* or more in one o	r more payments and the	
	tora, a	miount you paid	i mai cieditoi. De	i noi inclure navme	ants for domastic sur	anort obligations, such as	} }
	* Subject to ad	justment on 4/0	1/19 and every 3	it include payments I vears after that for	to an attorney for the	is bankruptcy case. ter the date of adjustmen	
مرب آ				consumer debts.	cases filed off of all	er the date of adjustmen	τ.
- 100					y creditor a total of \$	2800	
	No. Go to li		······································	toy, aid you pay air	y creditor a total or a	out or more?	
	Cledia	DE DO NOT INCIDA	ie payments for d	domestic support of	hliaatione euch se cl	al amount you paid that	
	alimon	y. Also, do not i	include payment	s to an attorney for	this bankruptcy case	ind support and	
				Dates of To	tal amount paid	1.51	en e
				payment	tai amount paid	Amount you still owe	Was this payment for
				¢	0.00	\$	
	Creditor's Na	ne				. Ψ	- ☐ Mortgage
	Number St	reet					Car Credit card
							Loan repayment
							Suppliers or vendor
	City	State	ZIP Code				Other
	The state of the s	and the second of the second o		* *************************************		· · · · · · · · · · · · · · · · · · ·	market seems a valence of the contract of the
				\$_	0.00	\$	Mortrage
	Creditor's Nar	ne	MARKET STATE OF THE STATE OF TH	\$	0.00	\$	- ☐ Mortgage
		ne		\$_	0.00	\$	☐ Car
				\$	0.00	\$	
				\$	0.00	\$	☐ Car☐ Credit card☐ Loan repayment
			ZIP Code	\$	0.00	\$	☐ Car☐ Credit card☐ Loan repayment☐ Suppliers or vendors
	Number Str	eel	ZIP Code	\$	0.00	\$	☐ Car☐ Credit card☐ Loan repayment☐ Suppliers or vendor
	Number Str	eel	ZIP Code				Car Credit card Loan repayment Suppliers or vendor Other
	Number Str	State	ZIP Code	\$\$\$\$\$	0.00		Car Credit card Loan repayment Suppliers or vendor Other Mortgage
	Number Str City Creditor's Nan	State	ZIP Code				Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car
	Number Str	State	ZIP Code				Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card
	Number Str City Creditor's Nan	State	ZIP Code				Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment
	Number Str City Creditor's Nan	State	ZIP Code				Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card

Michael

Debtor 1

W.

Allen

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	First Name	W. Middle Name	Allen East Name		**************************************		Case number (if known]	
orpo igent iuch :	ers include your prations of which t, including one f as child support o	relatives; any gei you are an office for a business yo and alimony.	neral partners; er, director, pers u operate as a	relatives of ar son in control	ny general pa or owner of	artners; p	artnerships of which	who was an insider? ch you are a general partr g securities; and any man- r domestic support obliga	
l Ye	es. List all paym	ents to an inside	r.	Dates of payment	Total a paid	mount	Amount you still owe	Reason for this payment	
ĩ	Insider's Name				\$	0.00	\$		
Ī	Number Street			-	-				
- 7	City	State	ZIP Code		-				
ī	nsider's Name				\$	0.00	\$	<u> </u>	W 11/4 da balan comment of Mile lea beau
_	Number Street				-				
č	City	State	ZIP Code	-	•				
hin ins ude No	o 1 year before y sider? e payments on d		nkruptcy, did yo	an insider.	J1 4 4 4			n account of a debt that	benefited
hin ins lude No	o 1 year before y sider? e payments on d	ou filed for ban	nkruptcy, did yo		payments of Total arpaid	mount :	Amount you still owe	n account of a debt that Reason for this payment Include creditor's name	benefited
hin ins lude No Ye:	o 1 year before y sider? e payments on d	ou filed for ban	nkruptcy, did yo	an insider. Dates of	Total a		Amount you still owe	Reason for this payment	benefited
hin ins lude No Ye:	i 1 year before y sider? e payments on d is. List all payme	ou filed for ban	nkruptcy, did yo	an insider. Dates of	Total a	mount :	Amount you still owe	Reason for this payment	benefited
hin ins lude No Ye:	in 1 year before y sider? e payments on d is. List all payme	ou filed for ban	nkruptcy, did yo	an insider. Dates of	Total a	mount :	Amount you still owe	Reason for this payment	benefited
No Ye	in 1 year before y sider? e payments on d is. List all payme	you filed for bandebts guaranteed	or cosigned by	an insider. Dates of	Total a	mount :	Amount you still owe	Reason for this payment	benefited
No Yes	in 1 year before y sider? e payments on d is. List all payme issider's Name	you filed for bandebts guaranteed	or cosigned by	an insider. Dates of	Total ar paid	0.00	Amount you still owe	Reason for this payment	benefited

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or 1	Michael First Name	W,	Allen Last Name			Case number (if know	n)	
			Cost Harit					
rt 4:	ldentify Leg	al Actions, R	epossessio	ns,	and Foreclosures			
	1 1 year before y	ou filed for ba	nkruptcy wer	G 1//	all a party in any law	suit, court action, or admi proces, collection suits, pater	inistrative procee rnity actions, suppo	ding? ort or custody modific
1 No)							
Ye	s. Fill in the detai	ls.						
			Nature	e of	the case	Court or agency		Status of the ca
Ca	ase title		Table					
						Court Name		Pending
						Number Street		On appeal Concluded
Ca	ase number							
25-3-3-3-	and the same of th					City State	e ZIP Code	
Ca	ase title		THE LEASE STATE OF THE STATE OF					
						Court Name		Pending On appeal
-						Number Street	***************************************	Concluded Concluded
Ca	ise number							
					andra and an angle of the state	City State	ZIP Code	
				100000	escribe the property		Date	Value of the propert
	Markoff Law Creditor's Name	LLC		C	mployer - Wage (verland Bond & I	Sarnishment For nvestment Corp	12/13/2016	\$6,080.00
	29 North Wa	cker Drive -	#550	·			to Hannes	
				ב [xplain what happened			
	Overland Bo	nd & Investn	nents Corp	ב ב				
	Chicago city	IL.	60606		Property was garn	ished.		
	Oity	State	ZIP Code			hed, seized, or levied.	infraturative programment comments of the speciments of the section of the sectio	ad publicad property and the transmission for the stress of the construction of the stress of the st
					escribe the property		Date	Value of the proper
							-	\$ 0.00
	Creditor's Name							Ψ
	Number Street			E	cplain what happened			
					Property was repos	hassass		
			·		Property was forec			
	City	State 2	IP Code		repair of the guille			
				L	 Property was attact 	ned, seized, or levied.		

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· 1	Michael First Name Mi	W. ddle Name L	Allen ast Name	Case num	nber (if known)		
/ithin	90 days before y	ou filed for bank	ruptcy, did any credito	or, including a bank or financ	ial institution, set off an	y amounts fro	m your
1 No		nake a payment b	ecause you owed a do	abt?			
	s. Fill in the details						
# 153	s. Fir in the details	·.					
			Describe the action	the creditor took	Date action was taken	Amount	100
Crec	ditor's Name		Company to the Art Command and the Company of the Command and		17.41.7		
			****			\$	0.0
Num	nber Street					¥	
			<u> </u>	And the promotes are consider to the HH may receive the trained Advisory principles are considered to the Advisory and the Advisory principles are considered to the Advisory principles are considere	***************************************		
City		State ZIP Code	Last 4 digits of acc	count number: XXXX			
Yes							
5:	List Certain G	ifts and Contrib	outions				

thin :	2 vears hotors ve	u filad for booker		- 250 - 120 - 120 - 120 - 120			
No	z years belore yo	a mea for pariking	ipicy, did you give any	y gifts with a total value of mo	ore than \$600 per persor	1?	
	. Fill in the details	for					
163	. Fili III the Details	ior each gill.					
Gif	fts with a total value	of more than \$600	Describe the gifts	A PANA PANA NO TR	Dates you ga	/e Value	3.14.
	r person				the gifts	re value	1.13
Daras	on to Whom You Gave t					\$	0.0
reisc	on to whom You Gave t	ne Gift	A CONTRACTOR				
	7.1.1.1					\$	0.0
							~~~
Numb	per Street						
					THE PERSON NAMED IN COLUMN NAM		
City		State ZIP Code					
Pers	on's relationship to y	ou					
				an ann ann ann, an gan gargarg gar ann a' an adaidh ard ann ann an gar ggar gar an 1974 an deachdd a cannan ag	· · · · · · · · · · · · · · · · · · ·		
		of more than \$600	Describe the gifts		Dates you gav	e Value	
per p	person	4 * *			the gifts		
					1		
Perso	on to Whom You Gave th	ne Gift				\$	0.0
				÷			
			managa.			\$	0.0
Numb	per Street						
City							
		State ZIP Code					
***	on's relationship to ye		PETRI I ITAMATAN				

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btor 1	Michael First Name M	W.	Last Na	llen _{ome}	Case number (if known)			***************************************
<b>Ø</b> No	0				ive any gifts or contributions with a total value of I	more than \$	\$600 to any	charity?
<b>∟</b> Y∈	es. Fill in the detail	s for each	gift or contri	bution.				
	Gifts or contribution hat total more than		ies	Describe wha		te you ntributed	Value	
Ch	parity's Name		Authorities and the second				\$	0.00
			The state of the s				\$	0.00
Nu	imber Street		di nebana i mananga					
City	y State	ZIP Code		Management News Control of the Contr				
rt 6:		_						
LLC:	List Certain	Losses						
	Describe the propert low the loss occurre		and	Include the am	insurance coverage for the loss Date loss nount that insurance has paid. List pending insurance 33 of Schedule A/B: Property.	e of your s	Value of lost	property
The state of the s			and the second s			Barttin Warlandson de antique de antique	\$	0.00
rt 7:	List Certain P	ayment	s or Transf	ers				
you co Include	onsulted about se e any attorneys, ba	eeking ba ankruptcy	nkruptcy or	preparing a l	anyone else acting on your behalf pay or transfer a bankruptcy petition? t counseling agencies for services required in your ba		ty to anyone	2
	eronica Eason			Description a		e payment or isfer was	Amount	of payment
9:	erson who was Paid 212 South Stor lumber Street	ny Island	<u>d</u>	Preparatior	n of Chapter 7 Bankruptcy Documents	21/2016	\$	100.00
	hicago		60617			,	\$	0.00
	ity	State	ZIP Code		TAXABLE STATE OF THE STATE OF T			
Ē	mail or website address							
Pe	erson Who Made the Pa	yment, if Not	You		TO THE PARTY OF TH			

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The state of the s	Mint wrong specific and the state of the sta			
001Debtorcc	Description and value of any propert	y transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	<ul> <li>Credit Counseling Certificate</li> </ul>			
372 Summit	***************************************		11/21/2016	s 1
Number Street				<b>J</b>
				\$
Jersey City NJ 07306 City State ZIP Code				
001debtorcc.com				
Email or websile address				
Person Who Made the Payment, if Not You	····			
Yes. Fill in the details.	Description and value of any property (	transferred	Date payment or	Amount of payr
Person Who Was Paid			transfer was made	Amount of payn
Number Street				
Number Street				e 0
number Street		may i i adaman and i adaman and i adaman and i adam		\$0
				\$0 \$0
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your	uptcy, did you sell, trade, or otherwise for business or financial affairs?	transfer any property to	anyone, other than	5 0.
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  n property erty).  Date transfer
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha	made as security (such as the granting or ave already listed on this statement.	f a security interest or mo	rtgage on your prope	\$ 0.
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo 'es. Fill in the details.	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  n property erty).  Date transfer
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo 'es. Fill in the details.  Person Who Received Transfer	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  n property erty).  Date transfer
City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo 'es. Fill in the details.  Person Who Received Transfer	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  n property erty).  Date transfer
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo 'es. Fill in the details.  Person Who Received Transfer	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  In property  erty).  Date transfer
City State ZIP Code  iin 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo 'es. Fill in the details.  Person Who Received Transfer  Number Street	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  In property  erty).  Date transfer
City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo fes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  In property  erty).  Date transfer
City State ZIP Code  iin 2 years before you filed for bankrusterred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you had lo fes. Fill in the details.  Person Who Received Transfer  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	made as security (such as the granting of ave already listed on this statement.  Description and value of property	f a security interest or mo	rtgage on your prope	\$ 0.  In property  erty).  Date transfer

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			·····	Case number (if known	1)	
	First Name A	Middle Name Las	1 Name			
, Within	10 years before	you filed for bankr	uptcy, did you transfer any proper	ty to a self-settled trust	or similar device of w	vhich you
		ese are often called a	asset-protection devices.)			•
<b>☑</b> No						
☐ Yes	s. Fill in the detai	ils.				•
				Section 1		9. 3
			Description and value of the prope			Date transfer was made
					enter de la companya	
Nan	me of trust					
			<b>14.</b>			
						al promotes
					THE	
art 8:	List Certain F	inancial Account	s, Instruments, Safe Deposit	Boxes, and Storage	Units	
		······································				
	i i year before yo i, sold, moved, c		tcy, were any financial accounts o	r instruments held in yo	our name, or for your	benefit,
			, or other financial accounts; certi	ficates of danneit; char	ac in hanka araditua	iona
broker	rage houses, per	nsion funds, coope	ratives, associations, and other fin	incates of deposit, share ancial institutions.	es iii banks, credit un	ions,
M No		, ,	,			
	s. Fill in the deta	ails.				
			t and Butter of a sure of the			
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer
						A14411.2 A1 X121.0101
					or transferred	
		A.44			or transferred	
Na	ame of Financial Insti	tution	XXXX	☐ Checking	or transferred	<b>\$</b> 0.00
		itution	xxxx		or transferred	\$0.0
	ame of Financial Insti umber Street	itution	xxxx	☐ Savings	or transferred	\$0.00
		itution	xxxx	Savings  Money market	or transferred	\$0.00
N:u	umber Street		xxxx	☐ Savings ☐ Money market ☐ Brokerage	or transferred	<b>\$</b> 0.00
	umber Street	State ZIP Code	XXXX	Savings  Money market	or transferred	\$0.00
Nu	umber Street	State ZIP Code		☐ Savings ☐ Money market ☐ Brokerage	or transferred	
Nu Cit	umber Street	State ZIP Code	XXXX	☐ Savings ☐ Money market ☐ Brokerage	or transferred	
Nu Cit	umber Street	State ZIP Code		Savings Money market Brokerage Other	or transferred	
Cit	umber Street	State ZIP Code		Savings  Money market Brokerage Other Checking Savings	or transferred	
Cit	umber Street ity ame of Financial Instit	State ZIP Code		Savings  Money market Brokerage Other Checking Savings Money market	or transferred	
Cit	umber Street ity ame of Financial Instit	State ZIP Code		Savings  Money market Brokerage Other Checking Savings Money market Brokerage	or transferred	
Nui	umber Street ity ame of Financial Institution	State ZIP Code		Savings  Money market Brokerage Other Checking Savings Money market	or transferred	
Nui City Nai	umber Street ity ame of Financial Institution umber Street	State ZIP Code	XXXX—	Savings  Money market Brokerage Other Checking Savings Money market Brokerage Other		\$ <u>0</u> .00
Nui City City City	umber Street  ity  ame of Financial Institution  umber Street	State ZIP Code  itution  State ZIP Code		Savings  Money market Brokerage Other Checking Savings Money market Brokerage Other		\$ <u>0</u> .00
Nui City City Do you securit	umber Street  ity  ame of Financial Institution  umber Street  ity  u now have, or dities, cash, or oth	State ZIP Code  itution  State ZIP Code	XXXX—	Savings  Money market Brokerage Other Checking Savings Money market Brokerage Other		\$0.00
Nui City Nai City City L Do you securit	ity ame of Financial Institution umber Street ity u now have, or dities, cash, or other	State ZIP Code  itution  State ZIP Code  itid you have within 1 her valuables?	XXXX—	Savings  Money market Brokerage Other Checking Savings Money market Brokerage Other		\$ <u>0</u> .00
Nui City Nai City City L Do you securit	umber Street  ity  ame of Financial Institution  umber Street  ity  u now have, or dities, cash, or oth	State ZIP Code  itution  State ZIP Code  itid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	\$ <u>0</u> .00
Nui City Nai Nui City L Do you securit	ity ame of Financial Institution umber Street ity u now have, or dities, cash, or other	State ZIP Code  itution  State ZIP Code  itid you have within 1 her valuables?	XXXX—	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other Other	ox or other depository	\$ 0.00
Nui City Nai Nui City L Do you securit	ity ame of Financial Institution umber Street ity u now have, or dities, cash, or other	State ZIP Code  itution  State ZIP Code  itid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	\$ 0.00
Nui City Nai Nui City L Do you securit	ity ame of Financial Institution umber Street ity u now have, or dities, cash, or other	State ZIP Code  itution  State ZIP Code  itid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	\$ 0.00  for  Do you still have it?
Nui  City  Nai  Nui  City  Do you securit  Y No  Yes	ity ame of Financial Institution umber Street ity u now have, or dities, cash, or other	State ZIP Code  State ZIP Code  lid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	\$ 0.00
Nui  City  Nai  Nui  City  Do you securit  Y No  Yes	ity ame of Financial Institution try try try try try try tries, cash, or other	State ZIP Code  State ZIP Code  lid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	Do you still have it?
Nui City  Do you securit  V  No  Yes	ity ame of Financial Institution try try try try try try tries, cash, or other	State ZIP Code  State ZIP Code  lid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	\$ 0.00  Do you still have it?
Nui City  Do you securit  V No Ves	ity ame of Financial Institution that it is a second of the second of th	State ZIP Code  State ZIP Code  lid you have within 1 her valuables?	XXXX	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other  Other	ox or other depository	\$ 0.00  Do you still have it?

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	Michael	W.	Allen	Case number (# known)	
	First Name	Middle Name	Last Name	Case Herrico (n xiowi)	The second secon
22. Hav	e you stored prop	erty in a storaç	ge unit or place other than your home with	in 1 year before you filed for bankrupt	cy?
2	No Yes. Fill in the det	in the			
	res. Fill in the del	ans.	Million after home on head account 4, 140		4
			Who else has or had access to it?	Describe the contents	Do you still have it?
					Filled and common property, 192, 193
	Name of Storage Fac	ility	Name		□ No
		•			☐ Yes
	Number Street		Number Street		
			City State ZIP Code		
	City	State ZIP	Code		
				en transfer i de la filonomia de la compania de la	estate de la composition della
Part 9	ldentify P	roperty You	Hold or Control for Someone Else		
23. Do	you hold or contr	ol any propert	y that someone else owns? Include any pr	operty you harrowed from are storing	ı far
or	hold in trust for so	meone.	, was common to our to, more ac any p	operty you bollowed from, are storing	101,
团					
	Yes. Fill in the de	tails.			
			Where is the property?	Describe the property	Value
	Owner's Name		Andrew Application (Control of Control of Co		\$ 0.00
			Number Street		T
	Number Street		Humber Saeet		
				<del></del>	
	City		City State ZIP (	ode	
	City	State ZIP	Code	1	
Part 1	Give Deta	ils About En	vironmental information		
For the	purpose of Part	10. the following	ng definitions apply:		
			ral, state, or local statute or regulation con	cerning pollution, contamination, rele	sees of
haz	ardous or toxic si	ubstances, wa:	stes, or material into the air, land, soil, sur	face water, groundwater, or other med	lium,
inc	luding statutes or	regulations co	ontrolling the cleanup of these substances	, wastes, or material.	
			property as defined under any environment	ntal law, whether you now own, opera-	te, or
util	ize it or used to ov	vn, operate, or	utilize it, including disposal sites.		
₩ Haz	ardous material n	neans anything	an environmental law defines as a hazard	lous waste, hazardous substance, tox	ic
sub	stance, hazardou	s material, pol	lutant, contaminant, or similar term.		
Report	all notices, releas	ses, and proce	edings that you know about, regardless of	when they occurred.	
04 14					
24. nas	any governmenta	i unit notinea	you that you may be liable or potentially lia	able under or in violation of an enviror	mental law?
Ø	No			r	
	Yes. Fill in the det	ails.			
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit		
				WHIRETHER CASE A SECOND CONTRACTOR OF THE SECO	
	Name of site	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Governmental unit  Number Street		
			Number Street		
					-

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tor 1	Michael First Name 1	W.	Allen Last Name	Case number	(if known)	
		governmental un	it of any release of hazardous mater	ial?		
U 1	es. Fill in the deta	ails.				
			Governmental unit	Environmental lav	v, if you know it	Date of notice
					onto 1 to disposition and colored Wells and the continuous money field, registrone	
	Name of site	***************************************		-		111111111111111111111111111111111111111
	7,2,1,5		Governmental unit			
	Number Street		Number Street		1999al a 1974 a conference consept per pi (421 al 1 al 1 de 1 la clas conseptentes en 1994a l la Louis Income	.J
	***************************************		City State ZIP Code	-		
	City	State ZIP Code				
·/···		Otato En Ovac			maring to a compagnition of the compagnition o	
Have	you been a party	in any judicial or	administrative proceeding under an	y environmental la	w? Include settlements and o	rders.
□ Y	es. Fill in the deta	ils.				
			Court or agency	Nature of the		Status of the
			Court of agency	Nature of the	case	case
C	Case title		<u></u>			:
			Court Name	<del>-</del>		Pending
-						On appeal
			Number Street			Concluded
7	ase number					
	ase number		City State ZIP Cod	ie		
rt 11			Business or Connections to Any			
	A sole proprieto A member of a A partner in a p An officer, direc	or or self-employe limited liability co artnership ctor, or managing	ruptcy, did you own a business or had in a trade, profession, or other acompany (LLC) or limited liability parting executive of a corporation or equity securities of a corporation	tivity, either full-tir nership (LLP)	ne or part-time	
<b>E</b> N	o. None of the abo	ove applies. Go to	o Part 12.			
			fill in the details below for each bus	iness.		
			Describe the nature of the busines	s	Employer Identification number	ŧ .
	Business Name				Do not include Social Security no	umber or ITIN.
					mint.	
	Number Street	\$			EIN:	
			Name of accountant or bookkeepe	r + 1 X + 1 1 1 1 1 1 1 1 1 1	Dates business existed	Maria de la companya
	<del></del>					
				1	From To	<del>-</del>
	City	State ZIP Code				that a reside to be compared as a second consequence of
			Describe the nature of the busines	<b>s</b> :	Employer Identification number	·
	Business Name				Do not include Social Security nu	imber or ITIN.
			41 odd	VAL LERENZA :	EIN: -	
	Number Street					
			Name of accountant or bookkeepe		Dates business existed	•
	<del></del>			,		
				1		
	City.	State 715 Code		- Tellery Parket	From To	^

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	Michael First Name	W.	Allen	Case number (if known)
	r ast name	Middle Name La	esi Name	Case Harriber (II known)
		er er er er en en en er		
			Describe the nature of the business	Employer Identification number
	Business Name			Do not include Social Security number or ITIN.
				EIN:
	Number Street	····		EIN:
			Name of accountant or bookkeeper	Dates business existed
	City	State ZIP Code	****	From To
	<b>,</b>	State ZIP Code		
***************************************	***************************************			terrate translation for the state of the sta
8 With	in 2 years hefore	vou filed for tour		
insti	itutions, creditors	s you med for bankru s, or other parties.	iptcy, did you give a financial statement	to anyone about your business? Include all financial
		s, or other parties.		
۱ ل <i>س</i> ا	es. Fill in the det	ails below.		
			Date issued	
	Name		MM / DD / YYYY	
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art 12	Sign Below	No.		
art 12	Sign Below	ers on this Statemen	et of Financial Affairs and any attachmen	nts, and I declare under penalty of perjury that the
I hav	Sign Below we read the answewers are true and connection with a	ers on this <i>Statemen</i> correct. I understan bankruptcy case can	result in fines up to \$250 000 or imput	nts, and I declare under penalty of perjury that the aling property, or obtaining money or property by fraud
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I have in control 18 U	Sign Below  We read the answer  Wers are true and  Connection with a lactor of the second of the sec	ers on this Statemen correct. I understan bankruptcy case can 1, 1519, and 3571.	Signature of Debtor 2  Date	aing property, or obtaining money or property by fraud sonment for up to 20 years, or both.

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ebtor 1	Michael	W.	Allen		
	First Name		Middle Name	Last Name	
ebtor 2					
Spouse, if filing)	First Name		Middle Name	Last Name	·
nited States	Bankruptcy Co	urt for the:	Northern District of Illi	inois	曷

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's name: Santander Consumer	☐ Surrender the property.	☐ No
Description of 2003 GMC Envoy property securing debt:	Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	<b>Ľ</b> Yes
	Retain the property and [explain]:	•
Creditor's name:	☐ Surrender the property.	<b>☑</b> No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
common medicina in material services in contract of the contra	☐ Surrender the property.	Microsoft Micros
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	- res
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	Who
The state of the s	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	• । ७७
-	Retain the property and [explain]:	

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tor 1	Michael First Name	W. Middle Name	Allen Last Name	Case number (# known)
art 2:	List Your	linovairad t	'ersonal Prope	
**********	200			listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G),
in the	information be	elow. Do not l	ist real estate lea	ases. Unexpired leases are leases that are still in effect; the lease period has not yet perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Desc	ribe your unex	pired personal	property leases	Will the lease be assumed?
Lesso	or's name:			<b>le</b> No
Descr proper	iption of leased		n e e e e e e e e e e e e e e e e e e e	The transfer of the control of the c
Lesso	r's name:			<b>₽</b> No
Descri proper	iption of leased rty:	A CONTRACTOR OF THE CONTRACTOR	arta Tambina ar mara a saucemana and an arta a signi a	Yes
Lesso	r's name;			<b>☑</b> No
Descri proper	iption of leased rty:			☐ Yes
_essor	r's name:		a tripopoli delegia delen elementa ada de apporto popoli popoli popoli el constituita delegia delegia delegia de	<b>☑</b> No
Descri proper	ption of leased	s to the minimum wave and many equipping .		Yes
_essor	r's name:	an the state of th	······································	₩ No
Descrip Propert	ption of leased	entranse a mengeneram en 1995 de Art entre endele	en e	Yes
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escrip ropert	ption of leased ty:	emining in the sea above to be above the first the sea	the transfer and the second second section of the second second second second second second second second second	Yes
essor'	's name:	mentalank y ng injandy ni iji dalah kalikana nacara na hapa	men V de fillet film de servicio de la villação (que de projecto que en escapa que describado en el villaçõe (	<b>☑</b> No
escrip ropert	otion of leased by:	**************************************	er in the second se	Yes
	n na na na haili dhinn ann dhu da na nann an pantagaige agus agus gu dh	об им бентурат брат, подомую сообрабован у бай байна дараныну	MM-4 490-490-490-000 обобыва и избанитуванија издражува од	
3;	Sign Below			
der persona	enalty of perju I property that	ry, I declare this is subject to	nat I have indicat an unexpired lea	ted my intention about any property of my estate that secures a debt and any ase.
M	Whus !	w.M		<b>x</b>
	e of Debtor 1			Signature of Debtor 2
ate /	1-29-1	Lo Company		Date MM / DD / YYYY